

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M.O.	69350	4-1-99
O.I.P.E. CLASSIFIER		2	4/6/99
FORMALITY REVIEW	10A	7202	4/14/99

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	2/21/94
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If more than 150 claims or 10 actions  
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— (Through numeral)... Canceled  
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A ..... Appeal  
 O ..... Objected

Claim		Date				
Final	Original					
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